

<b>SCC eFile</b>	<b>2012 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	212538801						
1.) CORPORATION NAME: <b>BISCUITVILLE, INC.</b>								
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM</b> <b>4701 COX RD STE 301</b> <b>GLEN ALLEN, VA 23060-6802</b>								
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>								
4.) STATE OR COUNTRY OF INCORPORATION: <b>NC</b>								
5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> <tr> <td>COMAV</td> <td>1,000</td> </tr> <tr> <td>COMBNV</td> <td>99,000</td> </tr> </table>			CLASS	AUTHORIZED	COMAV	1,000	COMBNV	99,000
CLASS	AUTHORIZED							
COMAV	1,000							
COMBNV	99,000							
6.) PRINCIPAL OFFICE ADDRESS:  <div style="text-align: center;">             ADDRESS: 1414 YANCEYVILLE ST              STE 300               CITY/ST/ZIP: GREENSBORO, NC 27405           </div>								
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.								
NAME: MAURICE N JENNINGS JR TITLE: P/T ADDRESS: 1916 GRANVILLE ROAD CITY/ST/ZIP/CO: GREENSBORO, NC 27408	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR						
NAME: MAURICE JENNINGS TITLE: VP/Chariman Eme ADDRESS: 315 INDIAN HARBOR ROAD CITY/ST/ZIP/CO: VERO BEACH, FL 32963	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR						
NAME: JEFF L MAY TITLE: VP/CFO ADDRESS: 2005 NOTTINGHAM LANE CITY/ST/ZIP/CO: BURLINGTON, NC 27215	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR						
NAME: BRYAN T COLLIE TITLE: S/CONT ADDRESS: 2012 CEDAR VIEW DRIVE CITY/ST/ZIP/CO: GREENSBORO, NC 27455	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR						
NAME: MARC ISAACSON TITLE: AST SEC ADDRESS: 2308 PRINCESS ANN ST CITY/ST/ZIP/CO: GREENSBORO, NC 27408	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR						
NAME: Sue Cole TITLE: CHAIRMAN ADDRESS: 800 Green Valley Road CITY/ST/ZIP/CO: Suite 104 Greensboro, NC 27408	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR						

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Linda Jennings DIRECTOR 315 Indian Harbor Road Vero Beach, FL 32963	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Michael Jacobs DIRECTOR 719 Gimghoul Road Chapel Hill, NC 27514	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Lee McAllister DIRECTOR Weaver Investment Company PO Box 26040 Greensboro, NC 27420	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Ron Scharbo DIRECTOR 190 Montag Circle Atlanta, GA 30307	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Dina Jennings DIRECTOR 1916 Granville Road Greensboro, NC 27405	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Frances Teter DIRECTOR 237 Ridgewood Avenue Charlotte, NC 28209	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ BRYAN T COLLIE		BRYAN T COLLIE, S/CONT	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		DATE	
PRINTED NAME AND CORPORATE TITLE		10/9/2012	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			